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** CONTINUING DATA *****

This appln claims benefit of 60/399,317 07/26/2002
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HD

** FOREIGN APPLICATIONS *****

HD None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 10/22/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	Examiner's Signature Initials	WA	28	29	7

ADDRESS

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TITLE

Eyeglass with MP3 player

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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